## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

لالمت فيرسنها

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

should be used for transmitting the ISSUE EFF and PUBLICATION FFF (if required). Blocks 1 through 5 should be completed where

appropriate. All further of indicated unless corrected indicated unless corrected in a sintenance fee notifications.	d below or directed oth	g the Patent, advance or erwise in Block 1, by (a	a) specifying a new corres	pondence address;	and/or (b) indicating a	rent correspondence address as separate "FEE ADDRESS" for
	·	ock I for any change of address)	Fee(	s) Transmittal. This rs. Each additional	s certificate cannot be us	d for domestic mailings of the sed for any other accompanying nment or formal drawing, must on.
STAAS & HAI SUITE 700 1201 NEW YOR	K AVENUE, N.W.	NOV 2 0 2	I her State addr trans	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
WASHINGTON	, DC 20005	TEXT .	Act [			(Depositor's name)
		A THANKS				(Signature)
					<del></del>	(Date)
APPLICATION NO.	CATION NO. FILING DATE FIRST NA		FIRST NAMED INVENTOR	TOR ATTORNEY DOCKET NO. CONFIRMATION NO.		
10/530,297	04/05/2005	Maki Hanasato		1850.1003 3642		
TITLE OF INVENTION:	THROTTLE DEVICE					
						,
	0)(4)( 7)(7)	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S)	DUE DATE DUE
APPLN. TYPE	SMALL ENTITY		\$300	\$0	\$1700	11/24/2006
nonprovisional	NO	\$1400	<del></del>	30 1	\$1700	11/24/2000
EXAMINER		ART UNIT	CLASS-SUBCLASS			
SOLIS, E		3747	123-399000			
. Change of corresponde CFR 1.363).	ence address or indication	n of "Fee Address" (37	2. For printing on the p	• •	1	
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,			
The Address indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 3			
			listed, no name will be printed.			
B. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or type	ne)		
PLEASE NOTE: Unl recordation as set forth	ess an assignee is ident h in 37 CFR 3.11. Comp	ified below, no assignee pletion of this form is NC	data will appear on the p T a substitute for filing an	atent. If an assign	ee is identified below, to MAHMED2 0000015	he document has been filed for 8 19539297
MIKUNI CORPORATION TOKYO, JAPAN 01 FC:1501 1400.8						1400.00 OP
MIRONI CO	KI OIMITTON	•	2021207	02 FC:156	14	300.00 OP
Please check the appropr	iate assignee category or	r categories (will not be p	rinted on the patent):	Individual 🔼 Co	orporation or other priva	te group entity Government
4a. The following fee(s)	are submitted:	4	b. Payment of Fee(s): (Ples	ase first reapply as	ny previously paid issue	e fee shown above)
Issue Fee A check is enclosed.  Publication Fee (No small entity discount permitted)  Payment by credit card. Form PTO-2038 is attached.						
Advance Order - # of Copies The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number						
5. Change in Entity Sta	tue (from status indicate	d above)	Overpaymong to Dope	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	" <del>-13=3333</del> \"	.,
a. Applicant claim	s SMALL ENTITY stat	us. See 37 CFR 1.27.	☐ b. Applicant is no lon	·		
NOTE: The Issue Fee an	d Publication Fee (if requested St.	nired) will not be accepted tes Patent and Trademark	ed from anyone other than the office.	the applicant; a reg	stered attorney or agent	or the assignee or other party in
Authorized Signature	1 iln	Vitclan		Date 1	rember 20,	2006
Typed or printed nam	e <u>DAVID M</u>	PITCHER		Registration N	vo. <u>25,908</u>	
This collection of inform an application. Confiden submitting the complete	nation is required by 37 ( tiality is governed by 35 d application form to the	CFR 1.311. The information of U.S.C. 122 and 37 CFR e USPTO. Time will var	ion is required to obtain or 1.14. This collection is es y depending upon the indi-	retain a benefit by t timated to take 12 vidual case. Any co	the public which is to file minutes to complete, incomments on the amount Trademark Office U.S.	e (and by the USPTO to process cluding gathering, preparing, and of time you require to complete Department of Commerce, P.O.

this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.